



LEE'S SUMMIT
MISSOURI

RECEIPT OF PAYMENT

Receipt Number:	2025096724
Receipt Date:	05/01/2025
Date Paid:	05/01/2025
Payment Method:	Credit Card,
Check Number:	,
Transaction Information:	
Full Amount:	\$50.00
Amount Tendered	\$50.00
Paid By:	GLOSS NAIL STUDIO, Address:4421 NE HIDEAWAY DR, Phone:(816) 600-2035

Fees:

Fee Description	Reference / Application Number	Amount Paid
9110058-Business License	LC81210313	\$50.00